

**LOCAL BANKRUPTCY FORM 3002.1-1**

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**

In re: Charissa Williams

CHAPTER 13  
CASE NO. 1 - 16 -bk- 01880

**STATEMENT IN RESPONSE TO NOTICE OF FINAL CURE PAYMENT**

**Part 1: Pre-Petition Arrears**

Creditor  agrees or  does not agree that the debtor(s) has paid in full the amount required to cure the pre-petition default to be paid through the Chapter 13 Plan.

If creditor disagrees:

Amount due to cure pre-petition arrears: \$ \_\_\_\_\_

Attach an itemized account of any required pre-petition amounts that the secured creditor contends remain unpaid as of the date of the *Notice of Final Cure Payment*.

**Part 2: Post-Petition Arrears**

*Outside the plan:* Creditor  agrees or  does not agree that the debtor(s) has paid all post-petition amounts due to be paid outside the Chapter 13 Plan directly to the secured creditor.

If the creditor disagrees:

Amount due to cure post-petition arrears due outside the plan: \$ \_\_\_\_\_

Attach an itemized account of any required post-petition amounts that the secured creditor contends remain unpaid as of the date of the *Notice of Final Cure Payment*.

*Inside the plan:* Creditor  agrees or  does not agree that the debtor(s) has paid all post-petition amounts due to be paid through the Chapter 13 Plan.

If the creditor disagrees:

Amount due to cure post-petition arrears due inside the plan: \$ \_\_\_\_\_

Attach an itemized account of any required post-petition amounts that the secured creditor contends remain unpaid as of the date of the *Notice of Final Cure Payment*.

### Part 3: Sign Here

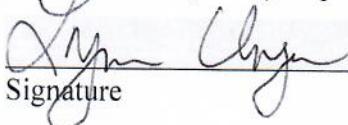
The person completing this Statement must sign it. Please print your name and other identifying information.

Check the appropriate box.

I am the creditor.

I am the creditor's authorized agent.  
(Attach a copy of power of attorney, if any.)

I certify under penalty of perjury that the foregoing is true and correct.



Signature

Print: Lynn Unger

Date: 06/29/21

Name

Bankruptcy Specialist

Title

Members 1st FCU

Company

5000 Louise Drive

Address

Mechanicsburg, PA 17055

717-795-5088

Unger@Members1st.org

Phone

Email

### Part 4: Service

Statement in Response to Notice of Final Cure Payment mailed to:

Debtor(s) (address): 2228 N 3rd Street, Harrisburg, PA 17110

Debtor(s)' Counsel:

Via CM/ECF

Via email (email address): \_\_\_\_\_

Via US Mail (address): \_\_\_\_\_

Trustee:

Via CM/ECF